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## BIB DATA SHEET

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\*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/NL04/00650 09/20/2004

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		NETHERLANDS	0	18	4
Verified and	(RONALD T NIEBAUER)					
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**TITLE**

## Method and Composition for Preventing Multiple Organ Dysfunction Syndrome

<b>FILING FEE RECEIVED</b> 1230	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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